



# FEE TRANSMITTAL for FY 2007

Patent fees are subject to annual revision.

Complete if Known

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

1,050.00

Application Number 10/567,705  
Filing Date February 6, 2006  
First Named Inventor Michael John CONNOLE  
Examiner Name Davis, Cassandra Hope  
Art Unit 3611  
Attorney Docket No. 37261P118

## METHOD OF PAYMENT (check all that apply)

- ☒ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☒ Credit any overpayments
- ☐ Charge fee(s) indicated below, except for the filing fee ☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
- ☒ Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	18 - 29 = 0	50.00	\$0.00
Independent Claims	2 - 3 = 0	210.00	\$0.00
Multiple Dependent			
Large Entity			
Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	50	2202	25
1201	210	2201	105
1203	370	2203	185
1204	810	2204	405
1205	810	2205	405
SUBTOTAL (1)		(\$)	0.00

\*\*or number previously paid, if greater, For Reissues, see below

### 2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
2053	130	2053	130
1251	120	2251	60
1252	460	2252	230
1253	1,050	2253	525
1254	1,640	2254	820
1255	2,230	2255	1,115
1401	510	2401	255
1402	510	2402	255
1403	1,030	2403	515
1451	1,510	2451	1,510
1460	130	2460	130
1807	50	1807	50
1806	180	1806	180
1809	810	1809	405
1810	810	2810	405
SUBTOTAL (2)		(\$)	1,050.00

Other fee (specify)

## SUBMITTED BY

Name (Print/Type) Eric S. Hyman

Registration No. (Attorney/Agent)

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Signature

Date

01/09/08